

# SIGN-UP SHEET

# Restaurant FUNDRAISING NIGHT



Event Date: April ~~20~~<sup>24</sup>th

Store Address Where Fundraiser Will Be Held:

1151 N DuPont Hwy DOVER, DE 19901

Organization Name: CENTRAL DELAWARE HABITAT RESTORE

Is this organization recognized by the government as a non-profit organization?  No  Yes (Copy of Sales Tax Exempt Certificate required, please attach.)

Organization's Federal Tax Identification Number: 51-0376650

Organization's Address: 544 Webbs LANE

City: DOVER State: DE ZIP: 19904

Contact Person's Name: SUSAN M DAVIS

Contact's Phone Number: 302-346-0220

Contact's Email Address: marketing@centraldelawarehabitat.org

Contact's Signature: Susan M Davis Date: 3/17/18

X Store Manager's Pre-Approval: Jiri Faust Date Approved: 3/17/18

**Terms of Agreement:** Please note this agreement must be approved at least (4) weeks before scheduled fundraiser event. The organization is responsible to promote the fundraising event with its members. All flyers are to be distributed prior to the event, and under no circumstance are flyers to be handed out in the restaurant, in the parking lot, or vicinity of the restaurant. A check with 15% of the pre-tax sales amount will be mailed to the organization within 4-6 weeks after the event. Please note: if the amount earned is less than \$20 a check will not be mailed.

### To be filled out by restaurant on night of event:

Restaurant Store Number: \_\_\_\_\_ Date: \_\_\_\_\_

General Manager's Approval Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**This sales confirmation must be faxed by the store to 303-273-8097  
Within 24 hours of the event.**

### To be filled out by treasury:

Pre Tax Sales Total: \_\_\_\_\_